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CHAPTER 1

MISSION AND PHILOSOPHY OF CALIFORNIA'S MENTAL HEALTH SYSTEM

WHAT ARE THE VISION, MISSION, AND VALUES OF THE PUBLIC MENTAL HEALTH SYSTEM?

The mental health constituency envisions a society in which persons of all ages, backgrounds, and cultures who experience serious mental illness or serious emotional disturbance receive high quality, effective services from the mental health system. As a result of the services, support, and rehabilitation they receive, these persons are able to lead happy, productive, fulfilling lives.

The mission of California's public mental health system is to enable adults and older adults with serious mental illnesses and children and their families to access services from a seamless system of care. These services will assist them, in a manner tailored to each individual, to achieve their personal goals and optimal recovery and to develop skills that support living the most constructive and satisfying lives possible in the least restrictive environment. The mental health system shall help children achieve optimal development.

The following values should guide development and implementation of the public mental health system:

- 1. Client-directed Approach. All services designed for adults and older adults with serious mental illnesses and for children and their families should be client-directed, and guided by an individual's goals, strengths needs, concerns, motivations, and disabilities.
 - Adults and older adults with serious mental illnesses:
 - have all rights, privileges, opportunities, and responsibilities as do other members of society;
 - are the central and deciding figures in all planning for treatment and rehabilitation based on their individual needs. Planning may also include family members and significant others as a source of information and support; and
 - should be fully informed, fully involved, and voluntarily agree to all treatment and rehabilitation provided unless they are legally found incapable of consenting to treatment.
 - Children, youth, and their families:
 - should be involved in designing their treatment plans;
 - should have treatment plans based on the strengths and resources of the child and family; and
 - should have treatment plans that acknowledge the family as a resource and that empower the family system to operate effectively.
 - should be involved in state and county level policy setting, system planning, program design, and evaluation of all elements of the service system.
- 2. Access to Services for Target Populations. Adults and older adults with serious mental illnesses and children with serious emotional disturbances have severe, disabling conditions giving them a right to effective treatment and a high priority for receiving services.
- **3. Focus on Recovery.** Mental health services should assist clients in their recovery to return to the most constructive and satisfying lifestyle of their own definition and choice. For some clients, spirituality may define well being and should be incorporated into the recovery process.
- 4. Systems of Care. Systems of care should consist of coordinated, integrated, and effective services meeting the unique needs of children and their families and adults and older adults with serious mental illnesses. These systems of care must operate in conjunction with an interagency network of other necessary services. Clients must have available an identifiable and qualified person or team responsible for their support and treatment. Systems of care should provide treatment and rehabilitation in the most appropriate and least restrictive environment, and if possible, in a community of the client's choosing.

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- **5. Outreach.** All adults and older adults with serious mental illnesses and children and their families should have access to crisis intervention on a 24-hour basis. Assertive outreach should make mental health services available to homeless and isolated individuals with serious mental illnesses.
- 5. Multiple Disabilities. Mental health services must address the special needs of children and youth, adults, and older adults, including persons with co-occurring psychiatric disabilities and substance abuse and persons with multiple disabilities.
- **6. Qualified Staff.** Qualified individuals trained in the client-directed approach must provide effective services based on clients' goals and deliver those services in environments conducive to helping clients achieve their goals.
- 7. Involvement of Direct Consumers and Family Members in Delivering Mental Health Services. The mental health system should maximize participation of direct consumers and family members as both paid and volunteer staff.
- **8.** Cultural Competence. The mental health system at all levels must have the capacity to provide services that are gender sensitive and culturally congruent with the clients' cultural and ethnic backgrounds, beliefs, and lifestyles.
 - Cultural competency is a set of congruent behaviors, attitudes, and policies that come together in a system, agency, or amongst professionals and enables that system, agency, or those professionals to work effectively in cross-cultural situations.
 - "Culture" implies an integrated pattern of human behavior, including language, thoughts, beliefs, communications, actions, customs, values, and other institutions, of racial, ethnic, religious, or social groups.
 - "Competence" implies having the capacity to function effectively within the context of culturally integrated patterns of human behavior as defined by each cultural group (Cross, 1989).
 - The cultural identities and worldviews of the consumers shape health and healing beliefs, practices, behaviors, and expectations. Wellness is uniquely defined by each individual and each cultural group.
 - ♦ A culturally competent system of care acknowledges and incorporates the importance of culture, assessment of cross-cultural relations, vigilance toward the dynamics that result from cultural differences, expansion of cultural knowledge, and adaptation of services to meet culturally unique needs (Cross, 1989).
 - A culturally competent system of care promotes for itself and among its providers the following characteristics:
 - awareness of the value of diversity and developing adaptation to diversity;
 - the capacity for continuous self-assessment;
 - institutionalized cultural knowledge;
 - awareness of the dynamics inherent when cultures interact; and
 - congruent behaviors, attitudes, and policies enabling the system, agencies, and mental health professionals to function effectively in cross-cultural institutions and communities (Cross, 1989).
- **9. Peer Support Models.** The mental health system must promote the development and use of self-help groups for adults and older adults with serious mental illnesses and of peer support for adults, older adults, children, youth, and families. Self-help and peer support must be available in all areas of the State.
- 10. System Accountability. State and local mental health systems of care must be accountable for the quality of their mental health services. This accountability is provided when state and local mental health programs use performance indicators to evaluate the effectiveness of their mental health services and to improve their quality.

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- **11. Administration.** State and local departments of mental health must manage programs in an efficient, timely, and cost-effective manner consistent with the values and principles of the *California Mental Health Master Plan*.
- 12. Research. The mental health system must encourage basic research into the nature and causes of mental illnesses along with effective rehabilitation strategies. The mental health system should actively cooperate with research centers in efforts leading to improved treatment methods, service delivery, and quality of life for mental health clients of all ages. Mental health research and evaluation should be focused on issues critical to women and sensitive to issues of ethnicity, age, and sexual orientation.
- 13. Education about Mental Illness and Serious Emotional Disturbances. The mental health community must work to eliminate the stigma associated with having mental illness or a serious emotional disturbance. Consumer and family advocates for mental health must be encouraged and as sisted to inform the public about the nature of mental illness and serious emotional disturbances from their viewpoint and about the needs of consumers and families. Mental health professional organizations should be encouraged to disseminate the most recent research findings on prevention, early intervention, and treatment of mental illness and serious emotional disturbances.
- 14. Advocacy Services. To assure the rights of persons with mental illnesses and of children and their families, the mental health system must be an advocate for patients' rights. The mental health system must also assure that consumers, and families of adults, older adults, and children are involved in providing advocacy at all levels.